HOUSE BILL No. 1715

DIGEST OF INTRODUCED BILL

Citations Affected: IC 27-1-3-30.

Synopsis: Health benefit mandate task force. Provides for per diem payment and cost reimbursement for members of the task force to review mandated benefits and mandated benefit proposals. Specifies certain requirements for the task force.

Effective: July 1, 2005.

Borders, Ripley

January 19, 2005, read first time and referred to Committee on Insurance.



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First Regular Session 114th General Assembly (2005)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2004 Regular Session of the General Assembly.

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HOUSE BILL No. 1715

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

- SECTION 1. IC 27-1-3-30 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2005]: Sec. 30. (a) As used in this section, "accident and sickness insurance policy" has the meaning set forth in IC 27-8-14.2-1.
 - (b) As used in this section, "health maintenance organization" has the meaning set forth in IC 27-13-1-19.
 - (c) As used in this section, "mandated benefit" means certain health coverage or an offering of certain health coverage that is required under:
 - (1) an accident and sickness insurance policy; or
 - (2) a contract with a health maintenance organization.
 - (d) As used in this section, "mandated benefit proposal" means a bill or resolution pending before the general assembly that, if enacted, would require certain health coverage or an offering of certain health coverage under:
 - (1) an accident and sickness insurance policy; or
 - (2) a contract with a health maintenance organization.



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1	(e) The commissioner shall establish a task force to review
2	mandated benefits and mandated benefit proposals.
3	(f) The task force must consist of nine (9) members appointed by the
4	governor as follows:
5	(1) Two (2) members representing the insurance industry.
6	(2) Two (2) members representing consumers.
7	(3) Two (2) members representing health care providers.
8	(4) Two (2) members representing the business sector.
9	(5) The commissioner or the commissioner's designee.
10	A registered lobbyist may not serve as a member of the task force.
11	(g) Members of the task force shall serve on a voluntary basis
12	without reimbursement. (g) Each member of the task force who is
13	not a state employee is entitled to the minimum salary per diem
14	provided by IC 4-10-11-2.1(b). The member is also entitled to
15	reimbursement for traveling expenses as provided under
16	IC 4-13-1-4 and other expenses actually incurred in connection
17	with the member's duties as provided in the state policies and
18	procedures established by the Indiana department of
19	administration and approved by the budget agency.
20	(h) Each member of the task force who is a state employee is
21	entitled to reimbursement for traveling expenses as provided under
22	IC 4-13-1-4 and other expenses actually incurred in connection
23	with the member's duties as provided in the state policies and
24	procedures established by the Indiana department of
25	administration and approved by the budget agency.
26	(h) (i) The department shall provide administrative support for the
27	functions of the task force.
28	(i) (j) Upon the:
29	(1) request of a member of the general assembly; or
30	(2) determination of the task force;
31	the task force shall review mandated benefits and assess the social,
32	medical, and financial impacts of at least one (1) existing mandated
33	benefit proposals as determined by the members of or one (1)
34	mandated benefit proposal each year.
35	(k) In assessing a mandated benefit or mandated benefit
36	proposal, and to the extent that information is available, the task
37	force shall consider:
38	(1) social impacts, including:
39	(A) the extent to which the service that is the subject of the
40	mandated benefit or mandated benefit proposal is
41	generally utilized by a significant part of the population;
42	(B) the extent to which the health coverage is already



1	generally available;	
2	(C) if the health coverage is not generally available, the	
3	extent to which the lack of health coverage results in	
4	unreasonable financial hardship;	
5	(D) the level of public demand for the service that is the	
6	subject of the mandated benefit or mandated benefit	
7	proposal;	
8	(E) the level of public demand for the health coverage; and	
9	(F) the extent to which the service that is the subject of the	_
0	mandated benefit or mandated benefit proposal is covered	
1	under self-funded health coverage provided by employers	
2	in Indiana that employ at least five hundred (500)	
3	employees;	
4	(2) medical impacts, including the extent to which the service	
5	that is the subject of the mandated benefit or mandated	
.6	benefit proposal is generally:	
.7	(A) recognized by the medical community as effective in	
. 8	patient treatment;	
.9	(B) demonstrated by a review of scientific and peer review	
20	literature to be recognized by the medical community; and	
21	(C) available and used by treating physicians; and	_
22	(3) financial impacts, including the:	
23	(A) extent to which the health coverage will increase or	
24	decrease the cost of the service that is the subject of the	
25	mandated benefit or mandated benefit proposal;	
26	(B) extent to which the health coverage will increase the	
27	appropriate use of the service that is the subject of the	
28	mandated benefit or mandated benefit proposal;	
29	(C) extent to which the service that is the subject of the	
0	mandated benefit or mandated benefit proposal will be a	
31	substitute for a more expensive service;	
32	(D) extent to which the health coverage will increase or	
33	decrease the:	
34	(i) administrative expenses of accident and sickness	
35	insurers and health maintenance organizations; and	
66	(ii) premium and administrative expenses of individuals	
57	covered under accident and sickness insurance policies	
8	and health maintenance organization contracts;	
19	(E) impact of the health coverage on the total cost of health	
10	care;	
1	(F) impact of all mandated benefits on the ability of	
12	employers to purchase health coverage that meets	



1	employee needs;	
2	(G) extent to which the financial impact of all mandated	
3	benefits, including the mandated benefit or mandated	
4	benefit proposal under consideration, will affect employee	
5	wages and compensation; and	
6	(H) extent to which the financial impact of all mandated	
7	benefits, including the mandated benefit or mandated	
8	benefit proposal under consideration, will affect hiring	
9	practices of Indiana employers.	
0	(1) The task force shall annually determine the full cost of all	
1	existing mandated benefits in the state as a percentage of:	
2	(1) the state's average annual wage; and	
3	(2) health coverage premiums.	
4	(m) In making the annual determination under subsection (l),	
5	the task force shall consider the full cost of existing mandated	
6	benefits under:	
7	(1) a typical group and individual:	
8	(A) accident and sickness insurance policy; and	
9	(B) health maintenance organization contract;	
0	in Indiana; and	
1	(2) the state employee health plans provided for in	
2	IC 5-10-8-7(b) and IC 5-10-8-7(c).	
3	(n) The task force may contract for actuarial services and other	
4	professional services.	_
5	(o) The task force and shall report the findings of the task force in	
6	an electronic format under IC 5-14-6 to the legislative council not later	
7	than December 31 of each year.	
8	(j) (p) Any recommendations made by the task force must be	V
9	approved by at least five (5) members of the task force.	
0	(k) (q) The department may adopt rules under IC 4-22-2 to	
1	implement this section.	
32	(1) (r) Information that identifies a person and that is obtained by the	
33	task force under this section is confidential.	

